



# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

Total Number of Pages in This Submission

3

|                      |                                     |
|----------------------|-------------------------------------|
| Application Number   | <b>09/650,337</b>                   |
| Filing Date          | <b>AUGUST 28, 2000</b>              |
| First Named Inventor | <b>WILLIAM J. DOWER</b>             |
| Group/Art Unit       | <b>1648</b>                         |
| Examiner Name        | <b>LOUISE WANG ZHIYING HUMPHREY</b> |

Attorney Docket Number

**44368-0001 C7****ENCLOSURES (check all that apply)**

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form                                   | <input type="checkbox"/> Assignment Papers<br><i>(for an Application)</i>   | <input type="checkbox"/> After Allowance Communication to Group                                      |
| <input type="checkbox"/> Fee Attached   | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                  |
| <input type="checkbox"/> Amendment / Response                                   | <input type="checkbox"/> Licensing-related Papers   | <input type="checkbox"/> Appeal Communication to Group<br><i>(Appeal Notice, Brief, Reply Brief)</i> |
| <input type="checkbox"/> After Final  | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Version with Markings Showing Changes                  | <input type="checkbox"/> Petition to Convert to a Provisional Application   | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Affidavits/declaration(s)                              | <input checked="" type="checkbox"/> <b>POWER OF ATTORNEY, REVOCATION CHANGE OF CORRESPONDENCE ADDRESS</b>                                   | <input type="checkbox"/> <b>Other Enclosure(s)</b><br><i>(please identify below):</i>                |
| <input type="checkbox"/> Extension of Time Request                              | <input type="checkbox"/> Terminal Disclaimer  | <b>STATEMENT UNDER 37 C.F.R. 3.73(b)</b>   |
| <input type="checkbox"/> Information Disclosure Statement (w/1 cited reference) | <input type="checkbox"/> Small Entity Statement   |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                 | <input type="checkbox"/> Request for Refund   |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application      | <b>Remarks</b>  |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53    | <b>AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT 08-1641 FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER (Ref. Atty. Docket No. 44368-0001 C7)</b> |  |

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**Firm  
or  
Individual name**JEFFERY P. BERNHARDT, REG. NO. 54,997, HELLER EHRLMAN LLP**

Signature

Date

**SEPTEMBER 4, 2007**Customer Number: **25213****CERTIFICATE OF FILING****FILED VIA EFS – SEPTEMBER 4, 2007**